

2684
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/001,650
Applicant : Li Fung Chang
Filed : October 31, 2001
T.C./A.U. : 2684
Examiner : Khai Minh Nguyen

Confirmation No.: 2019

Docket No. : ATT-042PUS
Customer No. : 022494

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16 Dec 04
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and Mail Deposit

By: Paul D. Durkee

Paul D. Durkee
Reg. No. 41,003

RESPONSE

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Official Action dated October 1, 2004, please amend the above-identified patent application as follows.

Amendments to the Claims are reflected in the listing of claims beginning on page 2 of this paper;

Remarks/Arguments begin on page 6 of this paper.



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/001,650	
	Filing Date	October 31, 2001	
	First Named Inventor	Li Fung Chang	
	Art Unit	2684	
	Examiner Name	Khai Minh Nguyen	
Total Number of Pages in This Submission	7	Attorney Docket Number	ATT-042PUS

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC Appeal Notice, Brief, Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Daly, Crowley & Mofford LLP		
Signature			
Printed name	Paul D. Durkee		
Date	16 Dec 04	Reg. No.	41,003

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Typed or printed name	Paul D. Durkee	Date	16 Dec 04

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